

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | | | 08/14/10 |
| O.I.P.E. CLASSIFIER | | | 8/17 |
| FORMALITY REVIEW | J | 71531 | |
| RESPONSE FORMALITY REVIEW | | | 10-23-11 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
|-------|----------|
| Final | Original |
| 1 | ✓ |
| 2 | ✓ |
| 3 | ✓ |
| 4 | ✓ |
| 5 | ✓ |
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| 11 | ✓ |
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| Claim | Date |
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| Final | Original |
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| Claim | Date |
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| Final | Original |
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If more than 150 claims or 10 actions
staple additional sheet here

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